

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works

MONTHLY ESTIMATE

FOR THE MONTH OF JULY 2012

Date: July 26, 2012

CONTRACTOR: Commercial Electric, Inc.

ADDRESS: 1010 Pa'apu Street

Contract No. 60030

City, State ZIP: Honolulu, Hawaii 96819

DAGS Job No. 12-20-2642

PROJECT TITLE: Hawaii State Hospital Various Locations, Replace Transformers and Switchgear

CONTRACT

Basic Contract Amount \$ 760,000.00 ✓

FOR INSPECTION BRANCH USE

☐ SUBMITTAL REGISTER ☐ COMMENCEMENT REQUIREMENTS

DUE MONTHLY:

☐ PROJECT SCHEDULE - INITIAL & ONGOING

☐ DAILY REPORTS

☐ PAYROLL AFFIDAVITS

MONTHLY ESTIMATE CHECKLIST

☒ CONTRACT NUMBER

☒ PROJECT NAME & LOCATION

☒ ALL SIGNATURES

CHANGE ORDERS

Total \$ 125,725.00 ✓

Adjusted Contract Amount \$ 885,725.00 ✓

WORK ACCOMPLISHED

Basic Contract

Change Order

Total

Completed to Date 39.89% \$ 303,200.00 ✓ 2.01% \$ 2,530.00 \$ 305,730.00

Retained REDUCED ☐ \$ 16,930.00 \$ 126.00 \$ 17,056.00

Amount Subject to Payment \$ 286,270.00 ✓ \$ 2,404.00 \$ 288,674.00

Payments to Date \$ 228,525.50 ✓ \$ - \$ 228,525.50

Payments Now Due \$ 57,744.50 \$ 2,404.00 \$ 60,148.50

Payment No. ☐ FINAL ☐ 5

INVOICE NO.: 0347-11

1. Computed and Checked by:

Paul N. H. 8-10-12

3. Recommended: Project Inspector or Engineer

M. S. S. 8-10-12

4. Recommended: Area Engineer/Architect

Clyde K. K. AUG 22 2012

5. Approved: Branch Chief or District Engineer

The Public Works Administrator certifies that change orders have been issued and the work performed.

[Signature] AUG 22 2012
State Public Works Administrator

2. I certify that the above bill is correct, just, that payment has not been received, and all payroll affidavits have been submitted, are current, or proper deductive exclusions have been made to this request.

Commercial Electric, Inc.

Name of Contractor

[Signature]

By signature / Title:

Date

For the Month of: JULY 2012

CLOSED	PRIME CONTRACTOR	TRADE	LICENSE NO.	BASIC CONTRACT AMOUNT	COMPL. TO DATE	% CMPL	RETN %	CONTRACT AMOUNT RETAINED
		Commercial Electric, Inc.	General Contractor	C-07215	\$760,000	\$303,200	39.89%	5%

	SUBCONTRACTOR	TRADE	LICENSE NO.	BASIC SUB-CONTRACT AMOUNT	COMPL. TO DATE	% CMPL	RETN %	SUB-CONTRACT AMOUNT RETAINED
	Quality General	Concrete/Masonry	ABC-13362	\$35,400	\$35,400	100.00%	5%	\$1,770
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
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						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
	Total Retained from Subs							\$1,770

BASIC CONTRACT - RETAINED FROM PRIME AND SUBS (A+B)

\$16,930

I certify that the above retentions are correct for this request.

COMMERCIAL ELECTRIC, INC.

Name of Contractor

NICK W. TEVES, JR., PRESIDENT

By Signature

JUL 26 2012

Date _____

Checked/Verified by:

A. H.

Initial - Project Inspector or Engineer

NOTE:

Columnar totals shall be equal in dollar value to that on the Monthly Estimate Sheet

CHANGE ORDER - PRIME & SUB CONTRACTOR RETAINAGE CALCULATION

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works

For the Month of: JULY 2012

CONTRACTOR:	Commercial Electric, Inc.	Contract No.: 60030
PROJECT TITLE:	Hawaii State Hospital Various Locations, Replace Tran	DAGS Job No.: 12-20-2642

CLOSED								CHANGE ORDER AMOUNT RETAINED
	PRIME CONTRACTOR	TRADE	LICENSE NO.	CHANGE ORDER AMOUNT	COMPL. TO DATE	% Cmpl	RETN %	
	Commercial Electric, Inc.	General Contractor	ABC-23456	\$125,725	\$2,530	2.01%	5%	\$126 A

	SUBCONTRACTOR	TRADE	LICENSE NO.	CHANGE ORDER SUB AMOUNT	COMPL. TO DATE	% CMPL	RETN %	CHANGE ORDER SUB AMOUNT RETAINED
				\$0	\$0	#DIV/0!	10%	\$0
				\$0	\$0	#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
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						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
						#DIV/0!	10%	\$0
	Total Retained from Subs							\$0 B

CHANGE ORDER CONTRACT - RETAINED FROM PRIME AND SUBS (A+B)	\$126
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I certify that the above retentions are correct for this request.

COMMERCIAL ELECTRIC, INC.

Name of Contractor

NICK W. TEVES, JR.

By Signature **PRESIDENT**

JUL 26 2012

Date _____

Checked/Verified by:

A. H.

Initial - Project Inspector or Engineer

NOTE:

Columnar totals shall be equal in dollar value to that on the Monthly Estimate Sheet

STATE OF HAWAII
DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES
DIVISION OF PUBLIC WORKS
Monthly Payment Slip

PAYMENT NO.: 5

PROJECT TITLE: HAWAII STATE HOSPITAL - VARIOUS LOCATIONS, REPLACE TRANSFORMERS & SWITCHGEAR

BILLING MONTH: July-12

DAGS JOB NO.: 1 2-20-2642

CONTRACT NO.: 60030

CONTRACTOR: COMMERCIAL ELECTRIC INC.

VENDOR CODE: 270400

Original Contract Payment Suffix: 1, 3

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
03	B09-408M	\$60,784.50	\$3,040.00	\$57,744.50
Totals:		\$60,784.50	\$3,040.00	\$57,744.50

Change Order Payment Suffix: 2, 4, 5

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
04	B09-408M	\$2,530.00	\$126.00	\$2,404.00
Totals:		\$2,530.00	\$126.00	\$2,404.00

Grand Total:	\$63,314.50	\$3,166.00	\$60,148.50
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[Signature]
Verified By

08/23/2012
DATE

(This Section for Administrative Services Office Use Only)

Vendor Code 270400

Cost Code 3A1

Voucher No. *8198N59*

Verified By *[Signature]* AUG 29 2012